

STATEMENT OF ECONOMIC INTERESTS

Date Received
Official Use OnlyRECEIVED
FAIR POLITICAL PRACTICES COMMISSION
COVER PAGERECEIVED BY
COVINA CITY CLERK

Please type or print in ink.

NAME OF FILER

(LAST)

(FIRST)

LOW

ROBERT

11 APR 21 AM 10:17
(MIDDLE)

1. Office, Agency, or Court

Agency Name

COVINA CITY COUNCIL

Division, Board, Department, District, if applicable

Your Position

COUNCIL MEMBER

► If filing for multiple positions, list below or on an attachment.

Agency: FOOTHILL TRANSIT

Position: BOARD ALTERNATE

2. Jurisdiction of Office (Check at least one box)

☐ State☐ Judge (Statewide Jurisdiction)☐ Multi-County☐ County of☒ City of COVINA☐ Other

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2010, through December 31, 2010.☐ Leaving Office: Date Left ____/____/____
(Check one)-or-
The period covered is ____/____/____, through December 31, 2010.☐ The period covered is January 1, 2010, through the date of leaving office.☐ Assuming Office: Date ____/____/____☐ The period covered is ____/____/____, through the date of leaving office.☐ Candidate: Election Year ____

Office sought, if different than Part 1: ____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 2

☐ Schedule A-1 - Investments - schedule attached☐ Schedule C - Income, Loans, & Business Positions - schedule attached☐ Schedule A-2 - Investments - schedule attached☒ Schedule D - Income - Gifts - schedule attached☐ Schedule B - Real Property - schedule attached☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

I certify under penalty of perjury under the laws of the State of California that

Date Signed

March 20, 2011
(month, day, year)

Signature

Name

LOW, ROBERT

SCHEDULE D
Income – Gifts

► NAME OF SOURCE

FOREST TENNANT

ADDRESS (Business Address Acceptable)

1744 ASPEN VIE WYOMING COVINA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DRAMA SUPPORTER

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

4/30/10 \$200.00 2 DRAMA TICKETS

_____/_____/_____ \$_____

_____/_____/_____ \$_____

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

_____/_____/_____ \$_____

_____/_____/_____ \$_____

_____/_____/_____ \$_____

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

_____/_____/_____ \$_____

_____/_____/_____ \$_____

_____/_____/_____ \$_____

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

_____/_____/_____ \$_____

_____/_____/_____ \$_____

_____/_____/_____ \$_____

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BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

_____/_____/_____ \$_____

_____/_____/_____ \$_____

_____/_____/_____ \$_____

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

_____/_____/_____ \$_____

_____/_____/_____ \$_____

_____/_____/_____ \$_____

Comments: _____